

**FEC FORM 9
24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR
ELECTIONEERING COMMUNICATIONS****1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations**

(a) Name

CITIZENS FOR STRENGTH AND SECURITY

(b) Address (number and street)

☐ check if different than previously reported

1718 M STREET NW S342

(c) City, State and ZIP Code

WASHINGTON

DC

20036

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number**C** C30001259**3. Is This Statement**☐**New**

or

☒**Amended****4. Covering Period**M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

through

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8**5. (a) Date of Public Distribution(s)**M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8**(b) Communication Title** When**6. The filer is a(n):** (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)(d) ☐ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☒ Other, specify: 527 Political Org**7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?**Yes ☐No ☐**8. Custodian of Records**

(a) Name

Lora Haggard

(b) Address (number and street)

29 Briarwood Drive

(c) City, State and ZIP Code

Ringgold

GA

30736

(d) Name of Employer or Principal Place of Business

Citizens For Strength And Security

(e) Occupation

Treasurer

9. Total Donations This Statement

410000.00

10. Total Disbursements/Obligations This Statement

369769.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Lora Haggard

SIGNATURE Electronically Filed by Lora Haggard

DATE 11/26/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.

List of Person(s) Sharing/Exercising Control

(use additional pages as necessary)

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11. Person(s) Sharing/Exercising Control

| | | | |
|-----------|---|-----------------------------------|----------------|
| A. | (a) Name | Transction ID : F91.000001 | |
| | Lora Haggard | | |
| | (b) Address (number and street) 29 Briarwood Drive | | |
| | (c) City, State and Zip Code | | |
| | Ringgold | GA | 30736 |
| | (d) Name of Employer or Principal Place of Business | | (e) Occupation |
| | Citizens For Strength And Security | | Treasurer |

Image# 28993293176
SCHEDULE 9-A
Donation(s) Received

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A. Full Name of Donor

UFCW

Mailing Address of Donor

1775 K Street, NW

City

State

Zip

Washington

DC

20006

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 8

Amount

150000.00

Transaction ID : F92.000001

B. Full Name of Donor

SEIU

Mailing Address of Donor

1800 Massachusetts Avenue, NW

City

State

Zip

Washington

DC

20036

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Amount

100000.00

Transaction ID : F92.000002

C. Full Name of Donor

Communications Workers of America

Mailing Address of Donor

501 Third Street

City

State

Zip

Washington

DC

20001

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Amount

50000.00

Transaction ID : F92.000003

D. Full Name of Donor

Vin Ryan

Mailing Address of Donor

10703 Charleston Dr

City

State

Zip

Vero Beach

FL

32963

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Amount

10000.00

Transaction ID : F92.000004

E. Full Name of Donor

International Brotherhood of Teamsters

Mailing Address of Donor

25 Louisiana Avenue, NW

City

State

Zip

Washington

DC

20001

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount

100000.00

Transaction ID : F92.000005

SUBTOTAL of Donations This Page (optional).....

410000.00

TOTAL This Period (last page this line number only).....
(carry total from last page to Line 9)

410000.00

SCHEDULE 9-B**Disbursement(s) Made or Obligations**

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| | | | | | | | |
|---|--|--|--|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) of Payee LUC Media, LLC | | | | Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 8</div> </div> | | | |
| Mailing Address of Payee 25 Whitlock Place Suite 201 | | | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">200000.00</div> | | | |
| City Marietta | | State GA | | Zip Code 30064 | | Communication Date <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 8</div> </div> | |
| Name of Employer | | Occupation | | Transaction ID : F93.000001 | | | |
| Purpose of Disbursement (including title(s) of communication(s)) Media Buy: When | | | | | | | |
| Name of Federal Candidate Saxby Chambliss | | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | | State: GA District: | | Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u> | |
| F94.000004 | | Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | | | | | | |
|---|--|--|--|---|--|---|--|
| B. Full Name (Last, First, Middle Initial) of Payee LUC Media, LLC | | | | Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8</div> </div> | | | |
| Mailing Address of Payee 25 Whitlock Place Suite 201 | | | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">150000.00</div> | | | |
| City Marietta | | State GA | | Zip Code 30064 | | Communication Date <div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y 1 1 / 2 5 / 2 0 0 8</div> </div> | |
| Name of Employer | | Occupation | | Transaction ID : F93.000002 | | | |
| Purpose of Disbursement (including title(s) of communication(s)) Media Buy: When | | | | | | | |
| Name of Federal Candidate Saxby Chambliss | | Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | | State: GA District: | | Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u> | |
| F94.000005 | | Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | | Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|--|
| SUBTOTAL of Disbursement/Obligation This Page (optional) | <div style="border: 1px solid black; padding: 2px; text-align: right;">350000.00</div> |
| TOTAL This Period (last page this line number only) (carry total from last page to line 10) | <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |

SCHEDULE 9-B**Disbursement(s) Made or Obligations**

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| | | | | | |
|---|--|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) of Payee See Change Media, LLC | | | | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 1 1 / 2 4 / 2 0 0 8 </div> | |
| Mailing Address of Payee 8609 West Knoll Drive #D | | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 19769.00 </div> | |
| City West Hollywood | | State CA | | Zip Code 90069 | |
| Name of Employer | | | | Occupation | |
| Purpose of Disbursement (including title(s) of communication(s)) Media Production | | | | | |
| Name of Federal Candidate Saxby Chambliss | | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: <u>GA</u> District: _____ | |
| F94.000006 | | Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Runoff</u> | | | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: _____ District: _____ | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: _____ District: _____ | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: _____ District: _____ | |
| Name of Federal Candidate | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: _____ District: _____ | |
| | | | | | |
| SUBTOTAL of Disbursement/Obligation This Page (optional) | | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 19769.00 </div> | |
| TOTAL This Period (last page this line number only) (carry total from last page to line 10) | | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 369769.00 </div> | |